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12/13/02

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
PATENT EXAMINING OPERATION

Applicant(s): Glen H. ERIKSON et al.

Serial No: 09/664,827

Group Art Unit: 1637

Filed: September 19, 2000

Examiner: S. Chunduru

Att. Docket No.: E1047/20044

Confirmation No.: 4947

For: QUADRUPLEX DNA AND DUPLEX PROBE SYSTEMS

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NOTICE OF APPEAL

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Sir:

In response to the Final Rejection dated May 30, 2002, Applicants hereby appeal the final rejection of claims 1-25 and 50-51 (claims 26-49 and 52 being withdrawn pursuant to a restriction requirement). Authorization to charge the small entity fee of \$160.00 for filing this Notice of Appeal is provided in the attached Fee Transmittal.

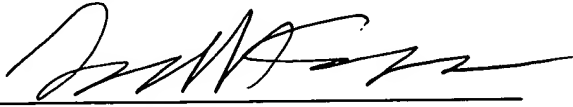
Respectfully submitted,

CAESAR, RIVISE, BERNSTEIN,  
COHEN & POKOTILOW, LTD.

December 2, 2002

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By

  
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/664,827	
	Filing Date	September 19, 2000	
	First Named Inventor	Glen H. ERIKSON	
	Group Art Unit	1637	
	Examiner Name	Suryaprabha Chunduru	
Total Number of Pages in This Submission	5	Attorney Docket Number	E1047/20044

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ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Return Receipt Postcard
Remarks  The Office is authorized to charge or credit our Account No. 03-0075 as necessary to effect entry and/or ensure consideration of this submission.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Caesar, Rivise, Bernstein, Cohen & Pokotilow, Ltd. Customer No. 03000 David M. Tener
Signature	
Date	December 2, 2002

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: <span style="border: 1px solid black;">December 2, 2002</span>			
Typed or printed name	David M. Tener, Registration No. 37,054		
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